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JAN 28 2005

FACSIMILE COVER SHEET

Deliver to: Man U. Phan, USPTO Art Group: 2665
 Facsimile No.: 703.872-9306 Date: January 28, 2005
 From: William E. Alford, Reg. No. 37,764
 Our Docket No.: 5440P001 Number of pages 24 including this sheet.
 Application No.: 09/852,819 Filing Date: 5/9/2001
 Docket Due Date(s): 2/9/2005

Enclosed are the following documents:

<input checked="" type="checkbox"/> Amendment: <u>Response</u> (20 pgs)	<input type="checkbox"/> Issue Fee Transmittal
<input type="checkbox"/> Appeal Brief (In triplicate) (pgs)	<input type="checkbox"/> Notice of Appeal
<input type="checkbox"/> Application: _____ (pgs) w/cover & abstract)	<input type="checkbox"/> Petition for: _____
<input type="checkbox"/> Assignment & Cover Sheet (pgs)	<input type="checkbox"/> Request for Continued Examination (RCE)
<input checked="" type="checkbox"/> Certificate of Facsimile _____	<input type="checkbox"/> Reply Brief (pgs)
<input type="checkbox"/> Continued Prosecution Application (CPA)	<input type="checkbox"/> Request & Certification Under 35 USC 122(b)(2)(B)(i)
<input type="checkbox"/> Declaration & POA (pgs)	<input type="checkbox"/> Request to Rescind Previous Nonpublication Request
<input type="checkbox"/> Drawings: sheets, figures	<input type="checkbox"/> Response to Notice of Missing Parts & Formalities Letter
<input type="checkbox"/> Extension of Time: _____	<input type="checkbox"/> Response to Written Opinion (pgs)
<input checked="" type="checkbox"/> Fee Transmittal (In duplicate)	<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> IDS & PTO/SB/08 (pgs)	<input type="checkbox"/> Transmittal of Publication Fee Due
<input type="checkbox"/> Other _____	<input checked="" type="checkbox"/> Transmittal Letter

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8A)

I hereby certify that this correspondence is being transmitted by facsimile on the date shown below to the United States Patent and Trademark Office.

Pat Sullivan
Pat Sullivan

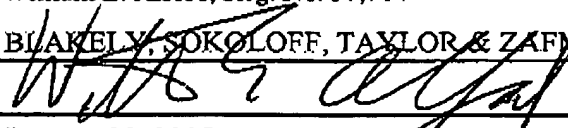
01/28/2005
 Date


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If you do not receive all the pages, or if there is any difficulty in receiving, please call: (714) 557-3800 and ask for Pat Sullivan.

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application No.	09/852,819
		Filing Date	May 9, 2001
		First Named Inventor	Jin H. Liwang
		Art Unit	2665
		Examiner Name	Man U. Phan
Total Number of Pages in This Submission	24	Attorney Docket Number	5440P001

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 10px;">Facsimile Transmittal Sheet</div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	William E. Alford, Reg. No. 37,764 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	January 28, 2005

CERTIFICATE OF MAILING/TRANSMISSION			
I hereby certify that this correspondence is being transmitted via facsimile on the date shown below to the United States Patent and Trademark Office.			
Typed or printed name	Pat Sullivan		
Signature		Date	January 28, 2005

Based on PTO/SB/21 (04-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wr) 06/04/2004.
 SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

FEE TRANSMITTAL for FY 2005 <small>Patent fees are subject to annual revision.</small>		Complete if Known	
		Application Number	09/852,819
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		Filing Date	May 9, 2001
		First Named Inventor	Jin H. Hwang
		Examiner Name	Man U. Phan
		Art Unit	2665
TOTAL AMOUNT OF PAYMENT		(\$)	0.00
		Attorney Docket No.	5440P001

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input type="checkbox"/> Deposit Account Deposit Account Number: <u>02-2666</u> Deposit Account Name: <u>Blakely, Sokoloff, Taylor & Zafman LLP</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) <input type="checkbox"/> Credit any overpayments	
under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.	

FEE CALCULATION																																																																																																																	
1. EXTRA CLAIM FEES																																																																																																																	
Total Claims <u>44</u> \times 6f = <u>0</u> \times <u>50.00</u> = <u>\$0.00</u> Independent Claims <u>5</u> \times 8f = <u>0</u> \times <u>200.00</u> = <u>\$0.00</u> Multiple Dependent _____ = _____																																																																																																																	
<table border="1"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>1202</td> <td>50</td> <td>2202</td> <td>25</td> <td>Claims in excess of 20</td> </tr> <tr> <td>1201</td> <td>200</td> <td>2201</td> <td>100</td> <td>Independent claims in excess of 3</td> </tr> <tr> <td>1203</td> <td>350</td> <td>2203</td> <td>180</td> <td>Multiple Dependent claim, if not paid</td> </tr> <tr> <td>1204</td> <td>300</td> <td>2204</td> <td>150</td> <td>**Reissue independent claims over original patent</td> </tr> <tr> <td>1205</td> <td>300</td> <td>2205</td> <td>150</td> <td>**Reissue claims in excess of 20 and over original patent</td> </tr> </tbody> </table>	Large Entity		Small Entity		Fee Description	Fee Code	Fee (\$)	Fee Code	Fee (\$)	1202	50	2202	25	Claims in excess of 20	1201	200	2201	100	Independent claims in excess of 3	1203	350	2203	180	Multiple Dependent claim, if not paid	1204	300	2204	150	**Reissue independent claims over original patent	1205	300	2205	150	**Reissue claims in excess of 20 and over original patent																																																																															
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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	William E. Alford	Registration No. (Attorney/Agent)	37,764
Signature		Telephone	(714) 557-3800
		Date	01/28/05

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (vii) 12/15/2004.
 SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Appl. No. 09/852,819
Amdt. Dated 02/xx/2005
Reply to Office Action of 11/09/2004

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JAN 28 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No. : 09/852,819 Confirmation No. 5478
Applicant : Jin H. Hwang
Filed : 05/09/2001
TC/A.U. : 2665
Examiner : PHAN, MAN U
Title : METHOD AND APPARATUS FOR ALIGNING MULTIPLE
DATA STREAMS AND MATCHING TRANSMISSION RATES
OF MULTIPLE DATA CHANNELS

Docket No. : 5440P001
Customer No. : 8791

Commissioner for Patents
PO Box 1450
Alexandria VA 22313-1450

AMENDMENT AND RESPONSE TO OFFICE ACTION

Dear Sir:

In response to the Office Action mailed on 11/09/2004,
please enter the following amendments and remarks in the above-
identified patent application:

CLAIMS listing begins on page 2.

REMARKS begin on page 15.

CONCLUSION and signature is on page 20.

Docket No: 5440P001

1

WEA/phs